Shape Tomorrow's Force
One Navy Medicine

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Shape Tomorrow's Force
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- **People: SECNAV's #1 Priority**
  - "Our most valuable asset"
  - "…well-trained, highly motivated Sailors and Marines who believe in their mission" play the decisive role
- **CNO's "Strategy for Our People"**
  - Fleet properly sized
  - **FIT** of sailor at right place, time, skills
  - More responsive MPTE systems
  - **Sailors, civilians, and their family** enjoy good quality of life and positively contribute to overall readiness

Accomplishing the Work
Total Force Integration

- **CNO's Total Force:** Active, Reserve, Federal Civilian, Contractor, and Family
- **Task Force Navy Family (TFNF)**
  - Flag-led, cross-functional Task Force to take care of Navy's family post-Katrina
  - Major players: CNI, CNP, NAVSUP, Legal, BUMED
  - Next steps
    - TFNF HQ sunset 15 Feb 06
    - Develop TFNF Functional Plan that "creates a model for family support in future crisis." (CNO FY06 Guidance)

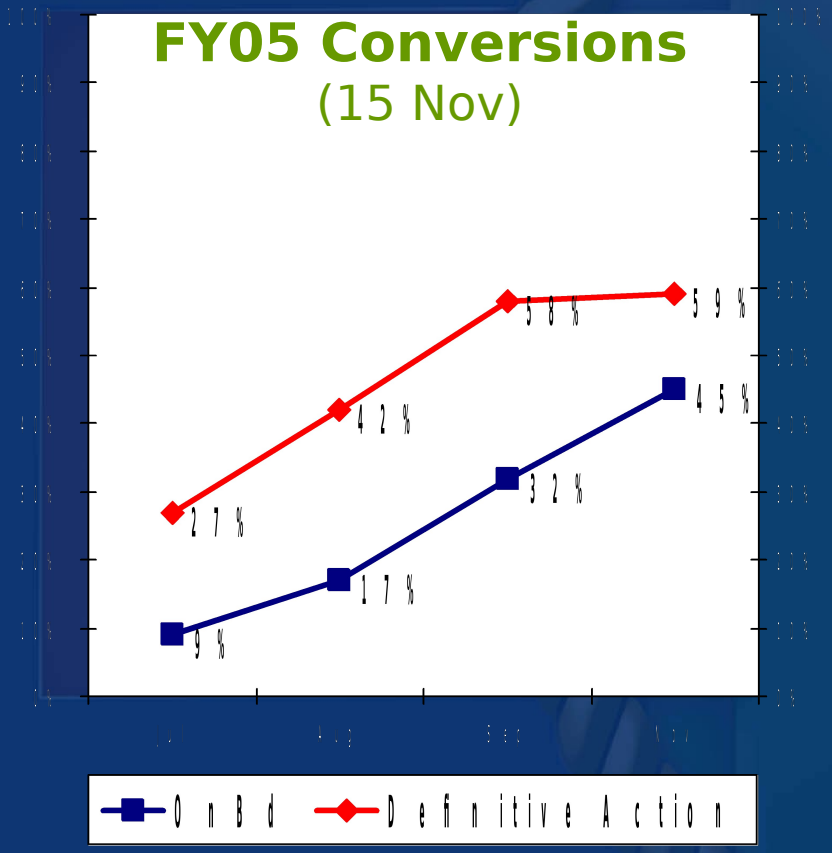
Accomplishing the Work
Enlisted Transformation

- **Step 1: HM-DT Merger (1 Oct 05)**
  - **NAVADMIN 214/5**
  - Increases deployable personnel while broadening career opportunities
  - Key tasks
    - AC/FTS Completion: 30 Jul 06
    - RC Completion: 30 Jul 07
    - Bridge training. CO Responsible for completion and documentation
  - Bridge training
    - HM E1-E6: DT Rate Training Manual
    - DT E1-E6: HM Rate Training Manual
    - DT All
      - HM “A” School (web-based)
      - HM Basic Skills
    - HM/DT E6-E9: AMDEC (web-based)

- **Step 2: NEC Consolidation**
  - Achieving “hybrid” Sailor, assignment flexibility, streamlined training, decreased training infrastructure
  - Collaborative effort with BUMED, BUPERS, NMETC, SLs, ETLs
    - 47 total HM/DT NECs
    - Plan: 13 NECs into 5
    - Current: 6 NECs into 2
    - 5 NECs deleted due to conversion

- **Step 3: Continue NEC Consolidation Review**

Accomplishing the Work
Mil to Civ Conversions



- Supporting DOD/DON strategy
- Hiring
  - Yes: FY05 Conversions
  - On-hold: FY06 Conversions
- Long-term effort in recruiting at local and national level
  - HRSC East: MD, RN, DDS, Lab
- Continuing to watch QDR
- FY07-FY09 Business Planning
  - Conversions fully adjustable based on hiring experience

Accomplishing the Work
First Call

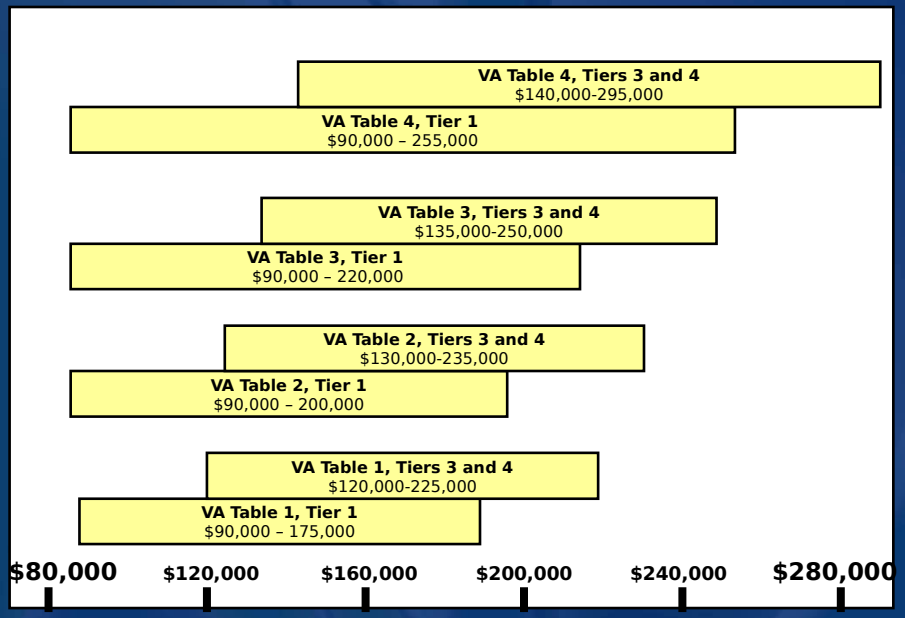
- Supporting DoDD 3000.05 stability operations within UTC framework
- Submitted to CNP for approval
- Final Billet mix: 48 Reserve billets (18 Enl, 30 Off)
  - 2 Environmental Health Assessment Teams (4 Enl, 4 Off)
  - 2 Enroute Care Teams (4 Enl, 4 Off)
  - 1 Crisis Assessment Team (4 Off)
  - 2 Sprint Teams (4 Enl, 8 Off)
  - 2 ER Trauma Teams (6 Enl, 6 Off)
  - 1 Joint Forces Maritime Assessment Team (4 Off)

Accomplishing the Work
Global Sourcing

- Global Sourcing
  - Enlarges deployment pool
  - Initial results: Effective, but requires
    - More rapid migration to UTCs
    - Adequate lead time for known deployments
    - Coordinated training
  - Issues to be addressed
    - EMF program management
    - Finalize baseline training and role of NEMTI
    - Better understanding of deployment validation process
  - CNO’s deployment concerns being examined
    - Dwell time
    - Red-line
    - ITEMPO

Accomplishing the Work
NSPS

- Earliest start dates of spirals
  - 1.1: 30 Apr 06
  - Navy Medicine in Spiral 2.1 or 2.2, no earlier than Spring 2007
- Align individual's performance objectives to command goals
- Compensation management
  - Pay for Performance
- Performance management
- Working towards VA's Market-based pay tables



Beyond the Priorities

- Operational relevance
- Dual value
- Efficient/effective healthcare
- Trusted Support

- Franchise discipline
- Leadership development
- Standardization
- Productivity

- POM
- Business Planning
- Accomplishing the work
- Global sourcing

Accomplishing the Work
Enlisted Transformation

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Hospital Corps Strategy

(1 Oct 05)

Phase I: HM-DT Merger

Phase II: NEC Management

- 13 NECs consolidated to 5
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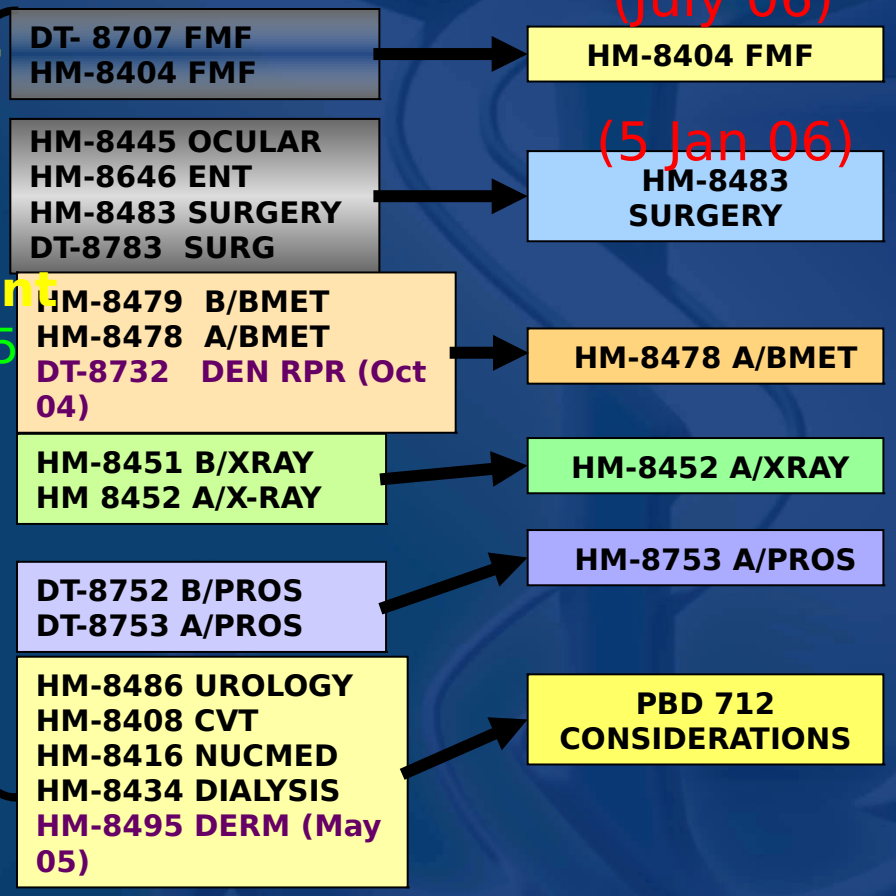
- 47 total HM/DT NECs

Phase III: Continue review of remaining NECs



efits: Assignment flexibility, streamlined training, decreased training infrastruc